

# DOE LIMS User Group Meeting Registration Form

Registration Form must be received by October 1, 2006.

(Please print or type and completed all sections)

## **PERSONAL INFORMATION:**

Name (Last, First, Middle Initial): \_\_\_\_\_

Affiliation/Employer: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

## **SPECIAL NEEDS:**

Indicate any special needs or dietary restrictions: \_\_\_\_\_ none \_\_\_\_\_

Indicate any audio-visual needs: \_\_\_\_\_

## **PRESENTATION:**

\_\_\_\_ Yes, I will present a presentation at the meeting.

Topic: \_\_\_\_\_

## **CLEARANCE INFORMATION:**

\_\_\_\_ I have a DOE standard badge with a \_\_\_\_\_ Q clearance \_\_\_\_\_ L clearance

\_\_\_\_ I have no clearance

Social Security Number: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Date of Birth: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

(If you do not wish to send your SSN, please call (803) 952-9454 with information)

**Mail Registration form to:**

**Donnie Tucker**

**Bldg 707-35B Room 11**

**Aiken, SC 29808**

**or E-Mail Registration form to:**

**[Donnie.tucker@srs.gov](mailto:Donnie.tucker@srs.gov)**

**or Fax to:**

**(803) 952-7341**